PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005					Docket Number (Optional) 05-403			
			to the Consolidated Appropriations A					
			r: 10/536,939	Filed: May 27, 2005				
For: Use of Levocetirizine for the Treatment of Persistent Allergic Rhinitis								
Art Unit: 1617					Examiner: Umamaheswari Ramachandran			
	is a re ication.	•	nder the provisions of 37 CFR 1.13	6(a) to extend the perio	od for filing a rep	oly in the	above iden	tified
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):								
	<u>Fee</u> <u>S</u>				nall Entity Fee			
	\boxtimes	One	month (37 CFR 1.17(a)(1))	\$120	\$60	\$_		120.00
		Two	months (37 CFR 1.17(a)(2))	\$450	\$225	\$_		
		Three	e months (37 CFR 1.17(a)(3))	\$1020	\$510	\$_		
		Four	months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
		Five	months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	· · · · · · · · · · · · · · · · · · ·	
	Applicant claims small entity status. See 37 CFR 1.27.							
	A check in the amount of the fee is enclosed.							
	Payment by credit card. Form PTO-2038 is attached.							
	The Director has already been authorized to charge fees in this application to a Deposit Account.							
	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2490. I have enclosed a duplicate copy of this sheet.							
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
I am	n the applicant/inventor.							:
	 □ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). ☑ attorney or agent of record. Registration Number 37,142 							
			attorney or agent under 37 C					
1	Registration number if acting under 37 CFR 1.34							
October 19, 2007								
Michael S. Greenfield Typed or printed name					Date 312-913-0001			
					Telephone Number			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
\boxtimes	Total	of <u>1</u> fo	orms are submitted.	10/23/2007 F	AHMAD1	00900010 1	32490 1053698	